

Olive View-UCLA Medical Center

VACANCY ANNOUNCEMENT

ASSISTANT NURSING DIRECTOR, ADMINISTRATION

Director Accreditation and Licensing

Duties include but are not limited to:

Develops and implements organization-wide quality improvement plan in accordance with the mission and strategic goals of the organization, federal and state laws and regulations, and accreditation standards. Plans develops and directs Quality Improvement functions, ensuring that the quality of care meets or exceeds professionally recognized standards and local, state and national benchmarks. Supervises QI Consultants in the implementation of performance initiatives to drive Joint Commission and other outside regulatory performance and contract compliance issues. Responsible for monitoring and evaluating staff performance.

Performs high level critical analyses and may perform statistical studies of QI data and performance related to accreditation standards or state licensing standards and presents findings to organizational and medical staff leadership committees. Directs groups or leads staff that directs groups to identify problems and develop solutions for quality, accreditation or risk management issues. Directs and oversees all accreditation related activities, including continuous readiness processes, interim surveys (planned and unplanned), and triennial survey processes. Coaches and mentors subordinate clinical and non-clinical staff. Develops and implements systems, policies, and procedures for the identification, collection, and analysis of performance measurement data.

Conducts or supervises staff who conduct special projects related to identified QI, RM, or accreditation issues. Conducts educational rounds related to accreditation, risk management, QI or Patient Safety. Acts as accreditation lead for all regulatory surveys. Assists in strategizing and facilitating various committee structures and functions to best address the QI processes and oversees Quality Committees. Identifies and communicates new state, federal and third party regulations and requirements to the staff.

Directs subordinate staff in conducting research to evaluate and measure clinical practice outcomes, reviewing and making recommendations for corrective actions, evaluating and researching clinical outcomes from the Patient Safety Net (PSN), conducting studies, and developing interventions based on data review and analysis and working with hospital departments and divisions to ensure compliance with regulatory issues and QI, Patient Safety and RM related functions. Directs subordinate staff with QI functions, including preparation for Joint Commission and other regulatory surveys. Leads, facilitates, and advises internal quality improvement teams. Actively participates on, or facilitates committees such as: Quality

Improvement, Accreditation, Patient Safety, and Risk Management.

Provides leadership in QI, and accreditation activities, including monitoring compliance with licensure and accreditation, and regulatory standards, and preparing, and assessing readiness for accreditation and certification surveys. Supervises staff who support medical staff and other quality committees. Leads site visit preparation and execution by regulatory and accreditation agencies (state agencies, Joint Commission, CMS) and completes appropriate corrective action plans within specified timelines. Maintains database related to accreditation standards (VSurvey) to ensure complete and accurate information available on status of compliance at all times.

Requirements: A Bachelor's degree, or higher from an accredited college or university in nursing or relevant Bachelor's degree from an accredited college or university in administration - AND - two years' experience supervising registered nurses. An advanced degree in nursing administration may be substituted for one year of experience.

Desirable Qualifications: Four year's experience in an administrative, supervisor, or consultative capacity. A Master's Degree in Nursing will be accepted for one year of the required experience. Strong communication, critical analysis and organization skills. Proficiency with Word 6.0, Excel, and data base management. Those with a Certified Professional in Health Care Quality (CPHQ) or Legal Nurse Consulting (LNC) certification training will be given preference.

Candidates will be required to take eligibility exam for Assistant Nursing Director, Administration for the County of Los Angeles. Application for exam is available on line at www.dhs.lacounty.gov under Employment. Placement on the exam does not guarantee position. Eligible candidates may be placed on an eligibility list for up to one year. Applications will be accepted until position is filled.

Please send resume and letter of interest to:

Laura Sarff, RN

lsarff@dhs.lacounty.gov

14445 Olive View Drive Room 2C138

Sylmar, California 91342

818-364-3025